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## \*BIBDATASHEET\*

CONFIRMATION NO. 1783

Bib Data Sheet

<b>SERIAL NUMBER</b> 10/062,831	<b>FILING OR 371(c) DATE</b> 02/05/2002 <b>RULE</b>	<b>CLASS</b> 435	<b>GROUP ART UNIT</b> 1644	<b>ATTORNEY DOCKET NO.</b> PZ006G13AP1C1D1
<b>APPLICANTS</b> Steven M. Ruben, Olney, MD; Craig A. Rosen, Laytonsville, MD; Gregory A. Endress, Florence, MA;				
<b>** CONTINUING DATA *****</b> This application is a DIV of 09/690,454 10/18/2000 PAT 6,531,447 which is a CON of 09/189,144 11/10/1998 ABN which is a CIP of PCT/US98/10868 05/28/1998 <i>MS</i>				
<b>** FOREIGN APPLICATIONS *****</b> <i>none MS</i>				
Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after met Allowance Verified and Acknowledged <i>MS</i> Examiner's Signature Initials		<b>STATE OR COUNTRY</b> MD	<b>SHEETS DRAWING</b> 0	<b>TOTAL CLAIMS</b> 75
<b>INDEPENDENT CLAIMS</b> 6				
<b>ADDRESS</b> 22195				
<b>TITLE</b> Secreted protein HEMCM42				
<b>FILING FEE RECEIVED</b> 1982	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	